

Ambulance Mental Health Response

Terry Simpson

Disclaimer

Class Professional Publishing have made every effort to ensure that the information, tables, drawings and diagrams contained in this book are accurate at the time of publication. The book cannot always contain all the information necessary for determining appropriate care and cannot address all individual situations; therefore, individuals using the book must ensure they have the appropriate knowledge and skills to enable suitable interpretation. Class Professional Publishing does not guarantee, and accepts no legal liability of whatever nature arising from or connected to, the accuracy, reliability, currency or completeness of the content of the text. Users must always be aware that such innovations or alterations after the date of publication may not be incorporated in the content. Please note, however, that Class Professional Publishing assumes no responsibility whatsoever for the content of external resources in the text or accompanying online materials.

Text © Terry Simpson 2022

All rights reserved. Without limiting the rights under copyright reserved above, no part of this publication may be reproduced, stored in or introduced into a retrieval system, or transmitted, in any form or by any means (electronic, mechanical, photocopying, recording or otherwise) without the prior written permission of the publisher of this book. The information presented in this book is accurate and current to the best of the authors' knowledge. The authors and publisher, however, make no guarantee as to, and assume no responsibility for, the correctness, sufficiency or completeness of such information or recommendation.

Printing history

This edition first published 2022

The authors and publisher welcome feedback from the users of this book. Please contact the publisher:

Class Professional Publishing, The Exchange, Express Park, Bristol Road, Bridgwater TA6 4RR

Telephone: 01278 427 826

Email: info@class.co.uk

www.classprofessional.co.uk

Class Professional Publishing is an imprint of Class Publishing Ltd

A CIP catalogue record for this book is available from the British Library

Paperback ISBN: 9781859599662

eBook ISBN: 9781859599815

Cover design by Hybert Design Limited, UK

Designed and typeset by Fresh Communications and PHi Business Solutions

Printed in UK by Hobbs

Contents

About the Author	4
Acknowledgements	5
Introduction	6
Part 1: Understanding and Assessing Mental Health	7
What Are Mental Health and Mental Illness?	9
Causes of Mental Illness	16
Initial Assessment of Patients with Mental Illness	22
Dynamic Risk Assessment and Management Plans	27
Legal Framework and Decision Making	34
Part 2: Mental Health Conditions Encountered in Prehospital Care	45
Anxiety and Stress	47
Post-traumatic Stress Disorder	51
Eating Disorders	52
Depression	53
Bipolar Disorder	57
Psychosis (Schizophrenia)	58
Personality Disorders	60
Addiction and Dependence	62
Part 3: Complex Needs	65
Learning Disabilities	67
Autism and Neurodiversity	71
Dementia	76
Part 4: Suicide and Self-harm	83
Understanding Suicide	85
Risk Factors	86
Risk Management	88
Self-harm	92
Part 5: Support in the Ambulance Service	93
The Mental Health Continuum	95
Resilience and Bounceability	97
Social Prescribing	99
Where to Find Support	101
A Framework for Staff Mental Health	103
Signposting	105
References	107
Index	111

About the Author



Terry Simpson, who currently works in an urgent and emergency mental health care NHS strategic transformation role, began his career as a mental health nurse 22 years ago. Working nationally across the ambulance sector, Terry was previously a Mental Health Lead at South Central Ambulance Service NHS Trust. With a background in adult mental health and crisis resolution teams, Terry also has extensive experience in education, patient care and improving ambulance mental health crisis response plans.

Terry joined the ambulance service wanting to improve patient experience, pathways, collaboration and joined-up services for patients presenting in crisis. He feels passionately that anyone in mental health crisis should have equal access to urgent and emergency care in a way comparable to any medical life-threatening emergency. Terry believes it is crucial to recognise that, like physical health, we all have mental health and consequently mental health is everybody's consideration.

Acknowledgements

The author would like to thank the following people for their involvement and support with the text:

- Elizabeth Biggs – Public Health Principal and Suicide Prevention Lead
- Alf Douglas – Creative Director, Fresh Communications
- Stephen Down – Mental Health Education Transformation Specialist and Mental Health Lead, NWAS
- Darren Earley – Specialist Paramedic
- Mairi Evans – Systemic Psychotherapist, CYPF and BEDS Clinical Director and Neurodiversity Lead, Berkshire NHS Foundation Trust
- Jules Fox – Approved Mental Health Professional Lead, Oxfordshire
- Chloe Lofthouse-Jones – Ambulance Dementia Education Lead
- Sonya McLean – Senior Transformation Manager for Mental Health Crisis Care, Hampshire and Isle of Wight ICS
- Reuben Pearce – Mental Health Nurse Consultant, Berkshire
- Georgia Pickwick – Mental Health Lead, Thames Valley Police
- Simon Tarrant – Autism and Crisis Care Pathway Development Manager, Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board
- Jaimee Wylam – Specialty Registrar in Public Health.

Thank you also to all the patients and carers with lived experience as part of the expert reference groups. Your contributions to improving awareness and education will help shape equality of access to emergency care between medical and mental health care. Whilst we may not have experienced the distress and trauma a mental health crisis can bring or impact on an individual's life, we can provide empathy, dignity and respect.

Class Professional Publishing would like to thank and acknowledge the following:

- All the anonymous reviewers who commented on earlier drafts of the text.
- Association of Ambulance Chief Executives for kind permission to reproduce the Mental Health Continuum on p. 95.
- South Western Ambulance Service NHS Foundation Trust for kind permission to reproduce the photograph on p. 11.
- Photos provided by Shutterstock (p.33 © eggegg/Shutterstock; p.55 © Andrey Popov/Shutterstock; p.60 © Pkpix / Shutterstock; p.92 © SpeedKingz / Shutterstock).
- Photos provided by iStock (p.50, p.56 © SDI Productions/iStock).
- All other photographs and artwork have been provided by Fresh Communications and PHi.

Introduction

About this book

The purpose of this book is to give you an introduction and practical guide to mental health and mental illness from an urgent and emergency service perspective. Although the guide is far from comprehensive, it provides a broad introduction into common mental health themes for those working in prehospital care. There are sections which cover basic principles of assessment and treatment, as well as a glossary of commonly encountered mental illnesses. We have also included a section which examines the interface between mental health, mental capacity and the legal framework to support compassionate care, decision making, safety and proportionate risk management.

Responding to mental health crisis in the ambulance service

Mental health difficulties are unfortunately common, and one in four people will be suffering from a mental health problem at any one time. Responding to mental health crisis in the ambulance service can be one of the most challenging incidents you may face. Historically there have been gaps around collaborations between the ambulance service, police, mental health providers and approved mental health professionals (AMHPs) within social care.

AMHPs are responsible for co-ordinating Mental Health Act assessments. Referrals should be considered if a patient is refusing treatment and

presents as a high risk to themselves or others in the context of a mental health condition. AMHPs work within social services and can be accessed for support via local operational contact details. Further details on legislation and support are provided on pages 34–40.

During your career you will be responding to patients presenting with mental illness. As part of the NHS long-term plan for ambulance mental health investment standards, ambulance services are building partnership-provider processes to support commissioner-led system transformation. Often the complexity of mental health conditions makes it very difficult for you to be able to work out exactly what is wrong or how you can assist someone in a crisis. You also may feel that you do not have the necessary skills to be able to assist someone in need, which is not an unusual feeling for many clinicians. The key principle is to have a compassionate, non-judgemental approach. Whilst we feel that on the whole our profession plays an excellent role in the early management of these patients, we also recognise that current training, support and development strategies need to be enhanced. In recognition of the significant role the ambulance service plays in responding to mental health calls, there will be a dedicated national investment programme to improve the capacity of the ambulance service to meet mental health needs (NHS England, 2021).

Your ambulance trust or employer may well have a database of services and signposting options, of which mental health pathways may be a referral route for support.

Understanding and Assessing Mental Health

This section includes:

- **What Are Mental Health and Mental Illness?**
- **Causes of Mental Illness**
- **Initial Assessment of Patients with Mental Illness**
- **Dynamic Risk Assessment and Management Plans**
- **Legal Framework and Decision Making**

What Are Mental Health and Mental Illness?

Mental health difficulties are unfortunately common, and one in four people will be suffering from a mental health problem at any one time (Mental Health Foundation, 2021a). Across the NHS, we frequently use terminology that could have a wide variety of interpretations. Mental health and mental illness are perhaps two areas where this happens most commonly. As with our physical health, our mental health can be positively or negatively impacted by past experience, social factors and levels of functioning. How we function largely depends on activities of daily living, such as sleep, diet, concentration, memory, motivation and mood. It can be helpful to see mental health as a continuum, as shown in the example on page 10. It is important that our interpretation of a patient's condition does not prejudice the response, care and management that we provide to that patient and their family. This is why we need a compassionate, non-judgemental approach.

What is a mental health crisis?

A crisis can be defined by a breakdown in normal coping strategies to a nature or degree that has a significant impact on a person's mental health or functioning. A crisis is often but not always triggered by a range of adjustment challenges which can include, but are not limited to, relationship problems, finances, work pressures or bereavement. This can potentially be made worse by pre-existing history of or vulnerability to mental health conditions. How you approach the patient could mean the difference between developing a helpful therapeutic relationship and potentially heightening anxiety and escalating the severity of the situation. This is easy to imagine in a time-critical, life-threatening cardiac arrest

or polytrauma patient, but when it comes to mental health it is often overlooked. The world is changing and the pressures that people face on a day-to-day basis can be the catalyst that makes someone's life unbearable, and we need to prepare for this. Often, you will be the first person who interacts with a patient in crisis, which is why it is so important to have a compassionate approach in order to facilitate de-escalation. De-escalation techniques are covered in more detail on page 27.



Parity of esteem

Parity of esteem is a concept which applies to many situations in modern society. In mental health, it has become recognised as a means for describing the inequality between physical and mental health care. Mental health patients historically do not get the same recognition as patients who present with physical health needs. This historic underinvestment has previously meant that emergency services are left bridging gaps and increasingly responding to patients in crisis. The government has sought to address this by setting out the Five Year Forward View for Mental Health (NHS England, 2016). In addition, the NHS Long Term Plan has set a commitment that the NHS will provide a single point of access to timely, universal mental health crisis care for everyone. It states that by 2024 anyone experiencing mental health crisis can call NHS 111. This is further likely to evolve to include 999, healthcare professional information and improving operational responses, with mental health ambulances staffed by ambulance clinicians and mental health crisis clinicians.